

L DWSF
12.3.412.1
1-31-86

1985 Form 4 GENERATOR ANNUAL DANGEROUS WASTE REPORT

1985

Form 4

PLEASE PRINT OR TYPE (form designed for use on Elite (12-pitch) typewriter).

1. COMPANY NAME

LONG PAINTING COMPANY

2. EPA/STATE HAZARDOUS WASTE IDENTIFICATION NUMBER

WAD044036747

3. LOCATION ADDRESS

Street or Description (see instructions)

City

State

Zip

8025 10th AVENUE SOUTH

SEATTLE

WA

98108

4. LOCATION COUNTY

KING

5. MAILING ADDRESS AND CONTACT PERSON FOR ANNUAL REPORT CORRESPONDENCE

Street or P.O. Box

City

State

Zip

Contact

MIKE COLE

PO BOX C-81435

SEATTLE

WA

98108

Phone 206-763-8050

DATE RECEIVED

6. MAILING ADDRESS AND CONTACT PERSON FOR GENERATOR FEE CORRESPONDENCE

Street or P.O. Box

City

State

Zip

Contact

MIKE COLE

PO BOX C-81435

SEATTLE

WA

98108

Phone 206-763-8050

7. WASHINGTON STATE DEPT. OF REVENUE REGISTRATION NUMBER

578-090-687

8. STANDARD INDUSTRIAL CLASSIFICATION (SIC) CODES

Primary

Secondary

Other

D001

F003

9. SITE EMPLOYMENT ON DECEMBER 31, 1985

10

10. REGULATORY STATUS—If your company meets any of the conditions below, you are exempt from completing page 2 of the report. (Circle the appropriate number)

1. Installation Closed—No longer conducting business at this site. (date closed: _____ (must be prior to January 1, 1985)).
2. Recycling—all wastes were recycled in a manner exempted by WAC 173-303-017.
3. All waste materials are not a solid waste as defined by WAC 173-303-016.
- ☒ 4. Did NOT generate Dangerous Waste at this site during 1984.
5. Small Quantity Generator—did not generate or accumulate a regulated quantity of dangerous waste during 1984 (complete 5a and 5b).
5a. Maximum generated in any month or batch (see instructions) was: ☐ < 100 pounds ☐ 100-220 pounds ☐ 220-400 pounds.
5b. Maximum Quantity accumulated on-site prior to shipment, specify amount (in pounds): _____
6. Other (include a cover letter detailing your basis for exemption from reporting).

11. ☐ ONE-TIME-ONLY GENERATOR STATUS: Regulated dangerous waste was generated only one time during calendar year 1984. Refer to instructions and WAC 173-305-040 to determine if you are a one-time-only generator. If this status applies to you, you must still complete page two of this report.

12. CERTIFICATION

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment. Unless I am a small quantity generator who has been exempted by statute or regulation from the duty to make a waste minimization certification under Section 3002(b) or RCRA, I also certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and I have selected the method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment.

Michel L. Cole

PRINT OR TYPE NAME

Michel L. Cole

SIGNATURE

01/31/86
DATE SIGNED

07463

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13. YOUR EPA/STATE I.D. NUMBER

WA

14. RECEIVING FACILITY (TSD)

EPA/STATE I.D. NUMBER

NAME:

ADDRESS:

15. TRANSPORTER

EPA/STATE I.D. NUMBER

NAME:

ADDRESS:

Weight Code

Weight
Code

16. WASTE IDENTIFICATION

LINE	A. Manifest Document Number	B. Manifest Shipment Date (MM DD YY)	C. Sta- tus	D. Physical State S=Solid L=Liquid G=Sludge M=Compressed Gas	E. Chemical Nature O=Organic I=Inorganic	F. Waste Description (see instructions)	G. Dangerous Waste Number (see instructions and WAC 173-303)		H. Waste Designa- tion DW or EHW	I. Amount of Waste	J.	K. For TSD Facility Use Only
1							++	++				
2							++	++				
3							++	++				
4							++	++				
5							++	++				
6							++	++				
7							++	++				
8							++	++				
9							++	++				
10							++	++				
11							++	++				
12							++	++				
13							++	++				
14							++	++				
15							++	++				

17. COMMENTS (Enter information by section and/or line number—see instructions).

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